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		13		&		(Depositor's name
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APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/611,896 FITLE OF INVENTION: T	07/03/2003 HIN FILM TRANSISTOR S	TRUCTURE ANI	Yu-Chou I D MANUFACTU		MR3029-77 DF	3708
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	09/18/2006
EXAMINER AR		ART UN	err er	CLASS-SUBCLASS	]	
TRAN, THIEN F 2811				257-052000	•	
I. Change of correspondence address or indication of "Fee Address" (37 (FR 1.363))  Change of correspondence address (or Change of Correspondence Address form PTOSB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTOSB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having 40% fiftight fiftight fill to 30983914 10611896 registered name, or agent) and the names of up to 2 registered patent attorneys or agents. Alebotation is 1400.00 OP listed, no name will be printed. BE FCL1504 380.00 OP			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.						
(A) NAME OF ASSIGN	EE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Chunghwa Picture Tubes, Ltd. Taipei City, Taiwan, R.O.C.						
Please check the appropriate	assignee category or catego	ries (will not be pr	rinted on the pater	t): 🗆 Individual 🖺 C	orporation or other private gr	oup entity Governmen
4a. The following fee(s) are  ☐ Issue Fee ☐ Publication Fee (No s ☐ Advance Order - # of	mall entity discount permitte		b. Payment of Fee(s): Solve Acted: In the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 *** Interpret_iciencies** The Director is hereby subhorized by charge the exceptions acted, or fredit any overpayment, to Deposit Account Number *** IBS-2011** Centilose are extra copy of this form).			
5. Change In Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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26,049